

Vered HaSharon PO Box 1000 Montreat, NC 28757

Name for Name Tag: _____

Experiencing The Holy Land

With First Presbyterian Church Cornelia, GA

Registration Form

March 23 – April 2, 2014 Trip Cost: \$3449 (US Funds Only)

Please print clearly, complete the entire form, and mail to Vered Ha Sharon at the address listed above:

Title (circle one): Mr. / Mrs. / Ms. / Rev. / Dr. / Other _____

Full Name (exactly as printed on passport):		
Address (street required):		
City, ST, Zip:		
Phone: H:	C:	
Passport #:	Exp Date:	Date of Birth:
Country of Passport:	Special Needs:	
Email:	Fax:	
Signature:		
Form must be filled out completely & a separate form submitted for each person! **Note: Each tour participant is responsible for a valid passport, transportation to departure city, & baggage fees. Please see the Terms & Conditions for more information.		
I would like to have	ne, first-serve basis if pref	
Enclosed is my deposit of \$300. Depo	osit is due by Novemb yment balance (\$1649) is	er 1, 2013. I understand that a 2nd payment due is due by February 15, 2014.
I would like a single room at an additional cost of \$695.		
Make checks payable to Vered Ha Sharon Travel and Tours Ltd.		